

OFFICIAL COMMUNICATION



5775 Morehouse Drive  
San Diego, CA 92121  
Fax: (858) 658-2502

RECEIVED  
CENTRAL FAX CENTER

JUL 20 2005

*Facsimile Transmittal*

DATE: July 20, 2005

TO: Amendment  
Commissioner for Patents

ATTN: Examiner: Alexander Jamal  
Art Unit: 2643

FAX NUMBER: (703) 872-9306

FROM: Howard H. Seo, Attorney for Applicant  
Registration No. 43,106

Total Number of Pages Sent: 12 (including this transmittal cover sheet)

\*\*\*\*\*

FILING BY FACSIMILE:

ATTORNEY DOCKET NO.: 990463

ENCLOSED ARE:

- Amendment (9 pages)
- Transmittal (in duplicate)

APPLICANT: Burke et al.  
ASSIGNEE: QUALCOMM Incorporated  
SERIAL NO.: 09/758,329  
FILED: January 10, 2001  
FOR: GRAPHICAL ENTRY IN PHONE DIALER

\*\*\*\*\*

Please contact Ann Andrews at (858) 845-8618 if all pages do not transmit.

**Special Instructions:** THIS MESSAGE IS INTENDED ONLY FOR THE USE OF THE INDIVIDUAL TO WHOM IT IS ADDRESSED AND CONTAINS INFORMATION THAT IS PRIVILEGED, CONFIDENTIAL AND EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAW. If the reader of this message is not the intended recipient, or the employee or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately. Thank you!

PTO/SB/21

U.S. Department of Commerce  
Patent and Trademark Office  
PATENT**RECEIVED  
CENTRAL FAX CENTER**

JUL 20 2005

**AMENDMENT TRANSMITTAL FORM**Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450Customer No.: 23696  
Attorney Docket No.: 990463  
In Re Application of: Burke et al.  
Serial Number: 09/758,329  
Filed: January 10, 2001  
Examiner: Alexander Jamal  
Group Art Unit: 2643

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entry Fee	Fee Paid
Total*	21	20	1	x \$50 =	\$50
Independent**	5	3	2	x \$200 =	\$400
Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input type="checkbox"/> No				\$360	\$
EXTENSION FEES				<input type="checkbox"/> One Month	\$120
				<input type="checkbox"/> Two Months	\$450
				<input checked="" type="checkbox"/> Three Months	\$1020
TERMINAL DISCLAIMER				\$130	\$
				<b>TOTAL FEE</b>	<b>\$1470</b>

\*If the number in column a is less than 20, enter 0 in column c.

\*\*If the number in column a is less than 3, enter 0 in column c.

4. ☐ Fee check in the amount of \$\_\_\_\_\_ is enclosed to pay for any claim and/or extension fees.
5. ☒ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$1470.  
The Commissioner is hereby authorized to charge payment of any additional fees that may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: July 20, 2005

Signature: Howard H. Seo, Reg. No. 43,106  
Phone No. 858-845-5235QUALCOMM Incorporated  
Attn: Patent Department  
5775 Morehouse Drive  
San Diego, California 92121-1714  
Telephone: (858) 658-5787  
Facsimile: (858) 658-2502**CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))**

I hereby certify that this correspondence is, on the date shown below, being:

**MAILING**

- ☐ deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Depositor's Name: \_\_\_\_\_  
(type or print name)

Date: July 20, 2005

**FACSIMILE**

- ☒ transmitted by facsimile to the Patent and Trademark Office.

Depositor's Name: Ann Andrews  
(type or print name)Signature: 

(TRANSAMD.VER1.13-04/30/04)